ED CHOICE FEDERAL PAC

909 New Jersey Avenue, SE, Apt 716 Washington, DC 20003 RECEIVED FEC MAIL CENTER

2016 AUG 29 PM 12: 12

August 18, 2016

Federal Election Commission 999 E. Street NW Washington, DC 20463 By Certified Mail-Return Receipt Requested

Re: Filing of FEC Form 1, Statement of Organization for Ed Choice Federal PAC

Dear Sir/Madam:

Enclosed for filing please find the original Statement of Organization (FEC Form 1) for Ed Choice Federal PAC.

If you have any questions, please contact the undersigned at (517) 525-4994 or mldoster666@gmail.com.

Thank you for your assistance in this matter.

Sincerely,

Mary L. Doster, Treasurer

Encls.

2016 · 08 · 28 · 05 · 00006615

FEC FORM 1

STATEMENT OF **ORGANIZATION**

FEC MAIL CENTER

2016 AUG 29 PH 12: 12

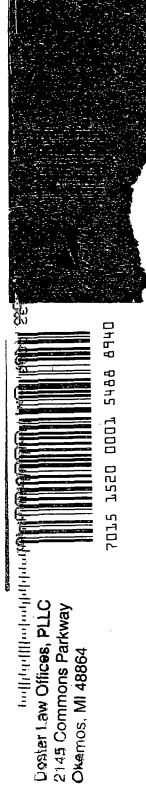
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
LED CHOICE FEDERAL PA	Δ		
FID CHOICE HEARINGE LY	7011111		
ADDRESS (number and street)	909 NEW JERSEY	/¡AYE; SE	
(Check if address is changed)	APT 716		
	WASHINGTON ; CITY▲		DC 20003 I ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRES	3S	•	
(Check if address	mldoster666@gr	mail.com	
is changed)	Optional Second E-Mail		
COMMITTEE'S WEB PAGE ADD	NRESS (LIBL)	·	
(Check if address	I		1
is changed)			
2. DATE 08 18	2016		
3. FEC IDENTIFICATION NU	MBER ► C	the state of the s	
4. IS THIS STATEMENT X	NEW (N) OR	AMENDED (A)	-
I certify that I have examined thi	is Statement and to the b	pest of my knowledge and belief i	t is true, correct and complete.
	MARYL DOSTE	D	
Type or Print Name of Treasurer	MARY L. DOSTE	К	
Signature of Treasurer	MARA	ester	Date 08 18 2016
NOTE: Submission of false, errone		tion may subject the person signing MATION SHOULD BE REPORTED	this Statement to the penalties of 52 U.S.C. §30109 WITHIN 10 DAYS.
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	FEL. ELIBINI

	FEC Fo	rm 1 (Revised 02/2009) Page 2			
. 1		OMMITTEE			
(Candidate	date Committee:			
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)			
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)			
	Name of Candidate				
	Candidate Party Affiliati	on State Senate President District			
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
	Name of Candidate				
ĺ	Party Con	nmittee:			
(d) [(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party			
F	Political A	ction Committee (PAC):			
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a			
		Corporation Corporation w/o Capital Stock Labor Organization			
		Membership Organization Trade Association Cooperative			
		In addition, this committee is a Lobbyist/Registrant PAC.			
((f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)			
		In addition, this committee is a Lobbyist/Registrant PAC.			
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
J	Joint Fundraising Representative:				
(9	g) 🚺	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.			
(۲	1)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.			
Committees Participating in Joint Fundraiser					
	1.				
	2.	FEC ID number C			
	3.	FEC ID number			

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	FEC Form 1 (Revised (2/2009)	Page 3
V	Vrite or Type Committee Name		
	ED CHOICE FEDERAL	PAC	
6.	Name of Any Connected C	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	ip PAC Sponsor
1			
<u> </u>			
<u>L</u>			
	Mailing Address		
		CITY STATE Z	IP CODE
	Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Lead	dership PAC Sponsor
	**	Calentia (Accessed Calentia)	
7.	Custodian of Records: Ider books and records.	tify by name, address (phone number optional) and position of the person in poss	ession of committee
	Full Name MARY	L. DOSTER	111111
	Mailing Address	2870 POBIE RD	
	J	1	
		[MASQN	, - , , ,
	Title or Position		IP CODE
	TREASURER	Telephone number 517 - 525	5 - 4994
8.	Treasurer: List the name and any designated agent (e.g., a	l address (phone number optional) of the treasurer of the committee; and the nam ssistant treasurer).	e and address of
	Full Name of Treasurer MARY L	DOSTER	
	Mailing Address	2870 PQB E,RD	
	ı	MASON MI 48854 CITY STATE Z	IP CODE
	Title or Position	Telephone number 517, - 52	

FEC Forn	n 1 (Revised 02/2009)	Page 4
	,	
Full Name of Designated Agent		
Mailing Address		
		1-
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
Banks or Other		holds accounts, rents
safety deposit be Name of Bank, (Depository, etc.	
safety deposit be	Depository, etc.	
safety deposit be Name of Bank, (oxes or maintains funds. Depository, etc. FLAGSTAR BANK 1801 W GRAND RIVER AVE 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	8864 .]-[
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safety deposit be Name of Bank, (Oxes or maintains funds. Depository, etc. FLAGSTAR BANK 1801 W GRAND RIVER AVE QKEMOS CITY STATE	8864 .]-
safety deposit be Name of Bank, if Mailing Address	Oxes or maintains funds. Depository, etc. FLAGSTAR BANK 1801 W GRAND RIVER AVE QKEMOS CITY STATE	8864 .]-
safety deposit be Name of Bank, if Mailing Address	Depository, etc. FLAGSTAR BANK 1801 W. GRAND RIVER AVE	8864 .]-
Safety deposit be Name of Bank, if Mailing Address	Depository, etc. FLAGSTAR BANK 1801 W. GRAND RIVER AVE	8864 .]-
Safety deposit be Name of Bank, if Mailing Address	Depository, etc. FLAGSTAR BANK 1801 W. GRAND RIVER AVE	8864 .]-



Federal Election Commission 999 E. Street NW Washington, DC 20465

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMIN The FEC added this page to the end of this filing to indica	
Hand Delivered	Date of Receipt
Postmarked USPS First Class Mail	Date of Receipt
USPS Registered/Certified	Postmarked (R/C) 8 / 18 / 16
USPS Priority Mail	Postmarked
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USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busin	ess Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Receipt or Postmarked
co h	8/29/16
(3/2015)	DATE PREPARED